Campaign Finance & Public Disclosure Board



cfb.mn.gov



Statement of Economic Interest

Candidate for local official position in a metropolitan governmental unit under Minn. Stat. § 10A.01, subd. 22; and 10A.09, subd. 6a

Filing instructions

(General instructions for completing the form are on page 2)

- Your statement is due at the governing body of the metropolitan governmental unit within 14 days after signing an affidavit of candidacy.
- This form may be filed by mail or fax sent to the metropolitan governmental unit.
- Address questions to the governing body of the metropolitan governmental unit.

Individual information	Employment information						
Name Pablo Hernandez Jr.	Occupation Operations Manager						
Address at which you wish to receive mail from the metropolitan governmental unit (You may use either a home or business address.)	Name of employer - indicate if self-employed or not employed (include employer as a source of compensation on page 3)						
Coon Papids, MN, 55433	Business address 21901 industrial Blvd. hogers MN 5543						
Telephone (daytime) (0 2 - 704 - 7727	City, state, zip of business ROGERS, MN. 55437						
Name of office City Council	hernanp@ Usibm. US						

Period covered								
Original statement	$\frac{05\sqrt{26}}{\text{filed for office}}$							
Certification								
1, Pablo Hernandez Dr- (print or type name)	, certify that the information contained on this form, including information on the schedules on page 3, is complete, true, and correct.							
Signature of candidate or elected local off	05-26-20 cial Date							

Notice: Any person who signs and certifies to be true a statement which the person knows contains false information or omlts required information is subject to a civil penalty imposed by the Board of up to \$3,000 and is subject to criminal prosecution for a gross misdemeanor.

This document is available in alternative formats to individuals with disabilities by calling 651-539-1180; 800-657-3889; or through the Minnesota Relay Service at 800-627-3529.

Attach additional pages if necessary to complete any of these schedules.

Business or professional activity categories Check the applicable box Check the applicable box Employee: \$250 in income in month and owns 25% or more of business in which security is held Securities Name of business in which security is held LPL Financial (TRA) GE (Standar Electric Stock) Real property County Sheet address and city; or section, township, and range Own Mortgage Contract Option to buy- Option worth Acresge County Sheet address and city; or section, township, and range Own Mortgage County Sheet address and city; or section, township, and range Own Mortgage County Sheet address and city; or section, township, and range Own Mortgage County County Sheet address and city; or section, township, and range Own Mortgage County Sheet address and city; or section, township, and range Own Mortgage County County County Check one-	Name of source			n	irector	Officer	Owner	Member	ch applica Partner	Employer	Employee	
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